## L12000/02232

(Re	equestor's Name)			
(Ac	ldress)			
(Ad	ldress)			
(Ci	ty/State/Zip/Phone	<del>: #)</del>		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
	A.	LUNT		
SEP - 8 2012				
·	EXA	MINER		

Office Use Only



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## **COVER LETTER**

TO:	Registration S Division of Co						
SUBJE	CT:	Namo Gro	up Solutions LLC				
			ted Liability Company		•		
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please 1	return all corresp	ondence concerning this matter	to the following:				
		***	Nelson Molina		_		
			Name of Person				
		Nan	no Group Solutions LLC		<del></del>		
			Firm/Company		1		
			PO Box 821695			<b>3</b> 12:	
			Address			2812 SEP 4	
		Per	nbroke Pines, FL 33082		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		FILED
			City/State and Zip Code		- 1일 - 1일 : 1일	PH 2	
		Na E mail address: (	moGroup@gmail.com to be used for future annual report notifica	tion)	CF STATE	2 27	
For fur	ther information	concerning this matter, please of	•			7	
	N	elson Molina	at ( 954 ) 8	94-2400		_	
	Name	of Person	Area Code & Daytime	Telephone Numb	er		
Enclose	ed is a check for	the following amount:					
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifi	filing Fe cate of S ed Copy onal cop	Status &	
	Regis Divisi P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building, 2661 Executive Cent Tallahassee, FL 3230	ions er Circle			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

N	amo Group Solutions LL	<u>_C</u>	
(Name of the Limite	d Liability Company as it now app A Florida Limited Liability Company	ears on our records.)	
The Articles of Organization for this Limited	Liability Company were filed on _	08/02/2012	and assigned
Florida document numberL1200010	02232		
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability company b	<u>iere</u> :	
		<u>ئۆ</u>	
The new name must be distinguishable and end w "L.L.C."	vith the words "Limited Liability Con	npany," the designation "F	C on the abbreviation
Enter new principal offices address, if appl	icable:	Ç ()	
(Principal office address MUST BE A STRE	ET ADDRESS)	<del>الا</del> ابن	2 m
		0;	
		De F	<b>37</b>
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE	<u> </u>		
		· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and		n our records, <u>enter t</u>	ne name of the new
registered agent and/or the new registered	oince address nere:		
Name of New Registered Agent:			
New Registered Office Address:	3640 SW 40th Ave.		
		Enter Florida street addi	ess
	Hollywood	, Florida	33023
	City		7in Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

Add Rem  Add			Address	Type of Action
Add Rem  Add  A				
Add Rem  Add				Remove
Add Rem  Add				☐ Add
Add   Rem   Add   Rem   Add   Rem   Add   Rem   Add   Remo   Add   R				Remove
If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)				
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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  ated				Remove
If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)				Fig. 28 -
If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)				Remove
If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			<u> </u>	
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Signature of a member or authorized representative of a member		n.l. a		

Page 2 of 2

Filing Fee: \$25.00